## PART B - FEE(S) TRANSMITTAL

Complete and send (		plicable feپ	ee(s), to: <u>Mail</u>	P.O. Box 1450			
AUG 0 5 20	05 🕷		or Fax	Alexandria, Virg (703) 746-4000	•		
INSTRUCTIONS: This for appropriate. We further corrindicated unless corrected the corrected to the correct to th	n skipled be used for transes of the February or directed otherwise	mitting the ISSU atent, advance ord in Block 1, by (a)	E FEE and PUB ders and notificat ) specifying a new	LICATION FEE (if requirements of maintenance fees was correspondence address;	ired). Blocks 1 through 5 sl vill be mailed to the current and/or (b) indicating a sepa	nould be completed wh correspondence address rate "FEE ADDRESS"	
CURRENT CORRESPONDENCE 20350 759	E ADDRESS (Note: Use Block 1 for a	any change of address)		Note: A certificate of Fee(s) Transmittal. The naners. Each additions	mailing can only be used for is certificate cannot be used for a larger, such as an assignment of mailing or transmission.	for any other accompany	
TOWNSEND AND TOWNSEND AND CREW, LLP TWO EMBARCADERO CENTER EIGHTH FLOOR SAN FRANCISCO, CA 94111-3834				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO (703) 746-4000, on the date indicated below.			
08/08/2005 TBESHAH2 00000041 201430 10627401					Nina L. McNeill (Depositor's na		
1 FC:2501 700.00 DA				Mina L. M. Seich (Signat			
2 FC:1504 300.00	D DA	,		August 1, 2	005	<u>u</u>	
APPLICATION NO.	FILING DATE	471		VENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/627,401 TITLE OF INVENTION: UN	07/24/2003 NWINDING SYSTEM FOR	HANDLING RE	Manuel Torres N ELS OF TISSUE	rature2	040146-000100US		
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700		\$300	\$1000	09/01/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS	]		
KIM, SA	ANG K	3654		242-555100			
Address form PTO/SB/12	ence address (or Change of	Correspondence	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT (pr	rint or type)			
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	clow, no assignee of this form is NO	data will appear T a substitute for	on the patent. If an assigning an assignment.	nee is identified below, the	document has been filed	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
$\frac{d}{dt}$							
Please check the appropriate	assignee category or category	ries (will not be pr	rinted on the pater	nt): Individual 🗖 (	Corporation or other private gr	roup entity Governm	
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):							
Issue Fee A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.							
Advance Order - # of Copies 10 XX The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 20-1430 (enclose an extra copy of this form).							
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The Director of the USPTO	MALL ENTITY status. See is requested to apply the Iss	ue Fee and Publica					
NOTE: The Issue Fee and P interest as shown by the reco	ublication Fee (if required) ords of the United States Pat	will not be accepte ent and Trademark	d from anyone of COffice.	her than the applicant; a re	sly paid issue fee to the applic gistered attorney or agent; or	the assignee or other part	
Authorized Signature				-	ugust 1, 2005		
Typed or printed name	Patrick M. Bou	cher	<del></del>		n No. 44,037		
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